



*Embassy of the United States of America
Yaounde, Cameroon*

**Small Grants Program
B.P. 817 Yaoundé, Cameroon**

**Julia Taft Refugee Fund
Application**

The Julia Taft Refugee Fund Application Form is FREE of charge and the Embassy DOES NOT request any payment to receive and evaluate a project.

Funding Opportunity #: AFYDE-JTF-GR-POLECON-2019

Date: _____

1. ORGANIZATION'S INFORMATION (please provide copy of registration certificate and bylaws)	
1.1 Organization Identity and Contact Information	
Name of group or organization:	
Type of group (check where appropriate):	<input type="checkbox"/> CIG <input type="checkbox"/> Association <input type="checkbox"/> NGO <input type="checkbox"/> Health organization <input type="checkbox"/> Educational organization <input type="checkbox"/> Other (specify) _____
Name of President /Delegate	First: _____ Last: _____
Address or P.O. Box:	
Telephone:	
E-mail (obligatory):	
1.2 Organization's Project Manager (if any)/Alternate Group Contact Information	
Name:	First: _____ Last: _____
Title:	
Address or P.O. Box:	
Telephone:	
E-mail (obligatory):	
1.3 Description of Organization	
When was your organization legalized? (attach paper)	
How many members?	
How often do you meet?	
How are you organized?	
What are your main activities?	
Have you ever received a grant from the US Embassy?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes:	Amount: _____



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	Year: Project title/type: Project Site:
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2. ORGANIZATION'S PAST EXPERIENCE

2.1 Previous projects carried out by the organization

Project 1	Title:	
	Type:	
	Main Donor:	
	Amount:	Donor's share = Group's contribution = Project total amount =
	Year	
Project 2	Title:	
	Type:	
	Main Donor:	
	Amount:	Donor's share = Group's contribution = Project total amount =
	Year	

2.2 Reference (cite 2 references that know your organization and its activities, but are not members or representative of your organization)

Name	Organization & Title	Contact (telephone and E-mail)

3. PROJECT INFORMATION

3.1 Executive Summary

3.2 Project Identification

Project Title:		
Project Type:	<input type="checkbox"/> WASH <input type="checkbox"/> Social Services <input type="checkbox"/> Income Generating Activities <input type="checkbox"/> Agriculture / Environment <input type="checkbox"/> Other (specify)_____	
Cite Project Deliverables (e.g.: 2 wells, 2 classrooms, 3 mills, etc.):		

3.3 Project Location

Village or Quarter:	
Subdivision:	
Division:	



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Region:	
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NB: Every project considered for funding will be visited before final approval. Please include location plan (sketch/ directions) with your application specifying how to get to your location.

3.4 Project Description
3.4.1 Number of Beneficiaries
Men _____ Women _____ Boys _____ Girls _____ Total _____
3.4.2 Project Background (describe the context of the project)
3.4.3 Project Justification (why is this project necessary?)
3.4.4 Project Objectives (overall goal and specific objectives)
3.4.5 Project Expected Impact (Describe the new situation that will arise from your project)
3.4.6 Project activities (for constructions, include sketches or drawings of any buildings. These do not need to be formal blueprints.)
What have you already done? Explain both planning and any construction. (Examples: foundation laid, walls raised to roof level, funds raised, etc.)
3.4.7 Key Personnel
3.4.8 Project partners (if any)
3.4.9 Project sustainability strategy
3.4.10 Project Monitoring and Evaluation



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3.4.11 Project Timeline (You must attach an activity timeline like the sample on the last page of this form)

- What have you already done? Explain both planning and any construction. (Examples: foundation laid, walls raised to roof level, funds raised, etc.)

- When did work on the project begin or when do you anticipate it will begin?

- Explain how much work has to be done to complete the project and how long it will take.

3.5 Project Financial Summary

3.5.1 General financial details (Attach your project detailed budget or cost estimate to your application. For equipment purchase, include pro forma invoices from at least two different sources.)

What is the total cost of this project?

How much money have you already raised for this project and has it been used? In FCFA:

Who provided this money?

How much will your organization contribute again?

Are other embassies, donors, or government agencies providing money or support for this project?

☐ **Yes** ☐ **No**
If yes, please provide details:

3.5.2 Embassy grant

How much money are you requesting from the United States Embassy?

FCFA:

How will the money be used?

Attach project budget (see template)

Signature of President/Delegate

Name: _____

Title: _____

Date: _____

Signature of Local Administrative Authority

Name: _____

Title: _____

Date: _____



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Applicant Check List

- Include a budget similar to Sample A on the following page or the Excel sample file provided.
- Include a timeline similar to Sample B on the following page.
- Include a location plan (sketch/directions) of how to locate your office/ project's site.
- Verify that you have provided a correct and current mailing address, telephone number, and e-mail address.
- Sign the application.
- Make a copy of the application and all supportive documents for your records.
- Do not submit any documents that were not requested.
- Send the original completed/signed application to the U.S. Embassy.

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Sample A: Budget

The budget should be stated in local currency (francs CFA) and should include a budget summary and a budget narrative that includes the details of the costs associated with each line items and other relevant information to support the proposed budget. There should be a direct relationship between the activities described in the proposal and the budget. All proposals should use the following sample budget format, but on an Excel sheet.

BUDGET SUMMARY: USE AN EXCEL SHEET

Date:

Name of organization:

Phases	Budget line/Item	USA Embassy (FCFA)	Organization's contribution	Other donors (if any)	Total
Phase 1	Activity 1	500,000	-	-	500,000
	Activity 2	-	350,000	-	350,000
	Activity 3	190,000	60,000	-	250,000
	Sub-total phase 1	690,000	410,000	-	1,100,000
Phase 2	Activity 4	900,000	-	-	900,000
	Activity 5	-	300,000	-	300,000
	Activity 6	300,000	-	-	300,000
	Activity 7	120,000	60,000	-	180,000
	Activity 8	320,000	-	-	320,000
	Activity 9	300,000	-	-	300,000
	Sub-total phase 2	1,940,000	360,000	-	2,300,000
Phase 3	Activity 10	100,000	-	-	100,000
	Activity 11	100,000	200,000	-	300,000
	Final reporting	-	200,000	-	200,000
	Sub-total phase 3	200,000	400,000	-	600,000
	Grand Total	2,830,000	1,170,000	-	4,000,000

NB: Name the activity

7% is authorized for project running cost.



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Sample B: Activities Timeline

All proposals should use the following sample activities timeline.

Project Activities	May 2019 – April 2020											
	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr
Phase I												
Activity 1	X											
Activity 2 and 3		X	X									
Phase II												
Activity 4				X	X	X						
Activity 5 and 6							X	X				
Activity 7 and 8								X				
Activity 9												
Phase III												
Activity 10									X	X		
Activity 11											X	
Writing Final Report												X
Evaluation												X